ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INIT:ALS	ID NO.	DATE
FEE DETERMINATION	18		74000
O.I.P.E. CLASSIFIER			/ /
FORMALITY REVIEW	5H	JC 1085	6/25701
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

V	Rejected	N	Non-elected
	Allowed	1	Interference
	(Through numeral) Canceled	Α	Appeal
	Restricted	0	Objected

	Nestricted 0	
Claim (Date	Claim Date	Claim Date
Final State of State	Final	Final Original
	51	101
	52	102
3/1/	53	103
- 	54	104
5	55	105
6	56	106
7	57	107
8	58	108
9. V.	59	109
10 V	60	110
O N	61	111
1 12 1 1 1 1 1 1 1 1	62	112
13 /	63	113
13 1	64	114
(5)	65	115
	66	116
17	67	118
18	68	1119
19	69	
20	70	120
21	71	121
22	72 73	122
23	74	124
24	75	125
25	76	126
26 27	77	127
28	78	128
29	79	129
30	80	130
31	81	131
32	82	132
33	83	133
34	84	134
35	85	135
36	86	136
37	87	137
38	88	138
39	89	139
40	90	140
41	91	141
42	92	142
43	93	143
44	94	144
45	95	145
46	96	146
47	97	147
48	98	148
49	99	149
50	100	l light

If more than 150 claims or 10 actions staple additional sheet here

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